Fee Only

Application No. 10/697,725
Amendment and Response to Final Office Action mailed May 10, 2004

VIA FACSIMILE (703) 872-9306

PATENT APPLICATION
Docket: 15436.249.40.1

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Deng, et al.

Serial No.:

10/697,725

Confirmation No.:

7720

Art Unit 2873

Filed:

October 30, 2003

For:

INTEGRATED OPTICAL ISOLATOR AND POLARIZATION BEAM COMBINER

Examiner:

Brandi N. Thomas

VIA FACSIMILE (703) 872-9306 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## AMENDMENT AND RESPONSE TO FIRST OFFICE ACTION

Sir:

This communication is in response to Examiner's Office Action mailed May 10, 2004 (the "Office Action"). Reconsideration is respectfully requested in view of the following amendments and remarks.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 16 of this paper.

/14/2004 PYARBORO 00000002 233176 10697725 le Ref: 00000002 DAW: 233178 10697725

FC:1201 FC:1202 88.00 DA 54.00 DA

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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number
10697725
15036,749,40

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR SMALL ENTITY		
TOTAL CLAIMS			32				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS 39			32 min	2 minus 20=		. 12		X\$ 9=		OR	X\$18=	216
INDEPENDENT CLAIMS 7 minus 3 =				nus 3 =	· H			X43=		OR	X86=	344
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							r	TOTAL		OR	TOTAL	1330
A	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A	<i></i>	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	· 35	Minus	*	32	= 3		X\$ 9=		OR	X\$18=	54
MEN	Independent	. 8	Minus	***	7	= 1		X43=		OR	X86=	84
لـُـا	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM		1 [	+145=		OR	+290=	
	• • • • • • • • • • • • • • • • • • • •			·		:		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	/#Q
	(Column 1) (Column 2) (Column 3)							,		•		-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
D. D.	Total	*	Minus	** .		=		X\$ 9=		OR	X\$18=	
MEN	Independent	*	Minus	###		=	1	X43=		OR	X86=	
٧_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM		<b>」</b>	+145=		OR	+290 <u>÷</u>	
·							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	<u>.</u>					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVI	ICCT	PRESENT EXTRA	$\Big] \Big[$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	##	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							ا د	+145=			+290=	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												